2				
ENTRY BLANK				
PLEASE TYPE OR PRINT	Entered previous May Show			
Ms. ☐ Mr. Artist EILEEN	(Last Name Last)			
Permanent 3060 CHAG, Address Street	RIM RIVERRO			
HAU-KIN				
Zip Area Code	41-6212			
Temporary Address				
Street	City			
Tel. ( )				
Zip Area Code				
Permanent address is in what count	Y? CUYAHOGA			
Born in Cuyahoga County  Yes  No				
Collaborator(If Any)				
If entries are not accepted or not so  Artist will pick up entries at Mu  Museum should dispose of entr  Museum should ship entries to	useum. ies.			

The attached card at right will be returned to you as notification of acceptance or rejection by the last week in April.

## THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed.

It is also understood that accepted entries will remain on exhibition until June 9, 1974.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature Eiler B. Dryall

ENTRY BLANKS							
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1974 MAY SHOW
The Cleveland Museum of Art
Cleveland, Ohio 44106

Please keep address within this box for window envelope.

Name	EILEEN B. INGALLS
Address	3060 CHAGRIN RIVER ROAD
	CHAGRIN FALLS Zip 44022

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your notification of acceptance or rejection.

## **ACCEPTANCE OR REJECTION NOTICE**

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.

DO NOT DETACH

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